



Town of Merrimack, New Hampshire SERVICE REQUEST

Tax Map Parcel(s): _____

Location and Description of Request or Complaint (detailed):

Description:

Party Making Request, Complaint or Inquiry:

Name:	Telephone #(Day):
Address:	(Email):

Employee Receiving Request:

Printed Name:	Date:	Time:	Signature:
Forwarded for Action to:			Date:

Chronological Report of Action

(Record date and time of action and name of employee making notification)

Additional pages may be used.

See Attached

Cc: Tim Thompson

Pink File